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July 2, 2012

Commissioner for Patent
Mail Stop Petitions
Box 1450
Alexandria, VA 22313-1460

Via facsimile: (571) 273-8300
Attn: Office of Petitions/ Kenya A. McLaughlin; Petition Attorney

In re Patent No. 6,053,380
Response to Request for Information:

Dear Ms. McLaughlin, My name is Tony D. Sherrod owner of patent # 6,053,380. I am responding to a letter I received dated June 18, 2012 concerning the reinstatement of my patent. Attached are medical records and a letter from the Social Security Administration that will explain my delay for the payment of maintenance fees which involves Patent No. 6,053,380. Also please understand that I was not aware of any fees at the time. In February of 2001 I fell into a comatose like state for about three weeks which caused me to lose memory. The effects of this misfortune literally shut me down for approximately 9-11 years in which for most of those years I was placed on disability until 2008. Please note the records attached. I've recently recovered and decided to begin to work with my patent and had an assistant to check it out for me. My assistant made some calls and found out that my patent had expired; this was told to me on May 17, 2012. I immediately responded by calling the offices of the USPTO who told me I was behind on maintenance fees in the amount of \$2,125.00. On 05-17-2012 I mailed a check for the fees I was advised to pay. Please inform me whether or not this information is sufficient. Thank you so very much!



Tony D. Sherrod
948 N. Manassas St.
Memphis TN 38107
Direct Cell 901-691-3549

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887cxf Social Security Administration

Disability Hearing Officer's Decision

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OFFICE OF PETITIONS

Code Numbers		
DO	DDS	DHU
566	S48	7843

PRIVACY/PAPERWORK ACT NOTICE: The Social Security Administration (SSA) is authorized to collect the information on this form under Section 205(a), 1631(e)(1)(A) and (B), and 872 of the Social Security Act, as amended (42 U.S.C. 405, 1383, and 1395ii). Giving us this information is mandatory. SSA will use the information on this form as an official document of the Disability Hearing Officer's decision.

TIME IT TAKES TO COMPLETE THIS FORM

We estimate that it will take you about 45 minutes to complete this form. This includes the time it will take to read the instructions, gather the necessary facts and fill out the form. If you have comments or suggestions on how long it takes to complete this form or any other aspect of this form, write to the Social Security Administration, ATTN: Reports Clearance Office, 1-A-21 Operations Bldg., Baltimore, MD 21235, and to the Office of Management and Budget, Paperwork Reduction Project (0960-0441), Washington, D. C. 20503. **DO NOT SEND COMPLETED FORMS OR INFORMATION CONCERNING YOUR CLAIM TO THESE OFFICES.**

CLAIMANT'S NAME	HEARING DATE
Tony D Sherrod	5-13-08
NUMBER HOLDER'S NAME	NUMBER HOLDER'S SSN
	411-21-3471

TYPE OF BENEFITS-->	Title II	Title XVI
(Check Relevant Type(s))	<input checked="" type="checkbox"/> DIB <input type="checkbox"/> DWB <input type="checkbox"/> CDB	<input type="checkbox"/> Disability <input type="checkbox"/> Blind <input type="checkbox"/> Child

The claimant was earlier notified that his/her disability:	
X	Ceased (Month/Year): 5-06
Did not exist as previously established because (Explain Below)	

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NUMBER HOLDER'S SSN

411-21-3471

PRESENT AT THE DISABILITY HEARING WERE THE FOLLOWING:

Hearing officer and Tony Sherrod, claimant

The basic issue to be determined by this disability hearing decision is whether the claimant is disabled/blind under the definition of disability/blindness contained in Section 223(d) and Section 1614(a) of the Social Act, taking into account, when applicable, the standard of review for termination of disability benefits contained Section 223(f) and Section 1614(a)(5) of the Social Security Act.

Other Issues are:

None

The Summary of Evidence, attached, lists medical/vocational reports in the claims folder obtained prior to the disability hearing.

The claimant has submitted additional documentary evidence which consist of the following:

None

Following is a summary of the claimant's testimony:

See SSA 1205 BK dated 5-13-08 in file.

Following is a summary of relevant witness testimony:

None

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NUMBER HOLDER'S SSN	411-21-3471
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ANALYSIS OF EVIDENCE AND FINDINGS OF FACT

The hearing officer has reviewed the medical, vocational and other information in the claimant's claims folder pertaining to the issue(s) described above. The hearing officer has also reviewed the testimony and any additional documentary evidence submitted at the disability hearing. After careful consideration of all evidence, the hearing officer makes the following findings:

Claimant was found to be disabled effective 4-1-02 because of depression and schizophrenic and other functional psychotic disorders which prevented him from performing any work activity. The date of that decision was 8-15-02 and this is his comparison point decision(CPD). As of 5-06, it was found that claimant's condition had improved and he had no work related limitations. Reconsideration was filed on 11-3-06 which resulted in this decision by a hearing officer.

Claimant's CPD is 8-15-02. In 2-01, he was hospitalized and treated for a psychotic disorder. On admission, he reported visual hallucinations of seeing an angel. He also said he saw demons. He was disorganized and paranoid. He improved spontaneously and was discharged to follow up at a local mental health center. He refused to do that and was to follow up with his primary care physician. In 4-02, he started going to a mental health center with complaints of difficulty concentrating, lapses in memory, and being unable to work because he could not remember the tasks of his trade as an electrical engineer. Claimant's mood and affect were depressed. He reported withdrawal, some irritability, and problems sleeping. He denied any psychotic symptoms at that time. He said he was tense and anxious. He was started on an antidepressant. In 5-02, he had had some side effects from the antidepressant. He was not sleeping and was worried. He had had a few episodes of visual and tactile hallucinations. His medication was changed. In 6-02, claimant felt better. His affect and mood had improved significantly.

At a psychological evaluation in 7-02, claimant's mood was appropriate but rather blunted. His thought content suggested ongoing signs of a psychosis, including delusions that he had a patent on a medical machine that sanitized rubber gloves before surgeons entered the operating room. His associations were loose and his speech was rambling. Claimant's conversation was very coherent and logical but as he got more comfortable, the details of his hallucinations and delusions got more prominent. He had problems with his short-term memory. His judgment was satisfactory, his impulse control was good, and his insight was fair to poor. His intellectual functioning was estimated to be in the average range. Claimant was living in his mother's house without utilities and had been doing this for 2 years. He reported that he walked about 16 miles a day. His daily activities and social contacts were limited. He had let his driver's license expire but was able to ride a bus and find his way to new parts of town. His diagnosis was major depression, single episode, severe, with psychotic features, partially controlled with medication. Information from a third party who knew about his condition and from a former employer were consistent with poor concentration and an inability to persist.(See SSA 887 enclosed for listing of medical sources)

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At a psychological evaluation in 4-06, claimant reported that he was no longer disabled. He was not in any mental health treatment and had stopped taking his medication for emotional problems due to side effects. He admitted that he still had trouble thinking as well as he once did. He was pleasant and cooperative. He reported that he had written 2000 songs and that he planned on recording them. His affect was bright and his mood almost euphoric. His judgment and insight were adequate. His memory was found to be in the borderline range. His intellectual functioning was estimated to be in the borderline to low average range. Claimant had renewed his driver's license and was able to drive without any problems. He said he walked 10 miles a day. His daily activities and social contacts were limited. His diagnosis was bi-polar disorder.

At another psychological evaluation in 2-07, claimant was pleasant and cooperative. He had a letter from his primary care physician showing that he had been put on notice for being terminated as a patient because of his noncompliance with diabetic treatment recommendations. He said he had not taken his medication or been compliant with his diabetes. He reported he wanted to start his business which was selling health juices. His energy was good as was his appetite and he was sleeping well. His interests were focused on raising his son, selling his health drinks, writing gospel music, and hoping to put a CD together to sell. When he had situational pressure, he got depressed. He said he had had episodes of expansive thoughts with grandiose plans and a minimum need for sleep in the past. He got distractible and agitated at times. He said his mood was "a little nervous" that day. He appeared to be mildly apprehensive with reactive and appropriate affect. He said his thought focus was on starting his business and "getting on his feet". His daily activities were not reported as limited. He was raising his son and said he could no longer walk like he used to. His social contacts were limited. His judgment was questionable. His insight was fair. His memory and concentration were adequate. His diagnosis was bipolar disorder with recent history of psychotic experiences.

Claimant has diabetes mellitus, hypertension and increased lipids. In 3-06, his blood pressure was 138/88. He had no signs of any congestive heart failure. In 10-06, his body mass index had decreased from 41.2 to 38.7. Documentation does not show signs of any end organ damage. An ophthalmologic evaluation in 2-07 showed that claimant's vision corrected to 20/20. No retinopathy was found. He had mild nasal visual field constriction in both eyes. His visual efficiency was 89%.(See SSA 887 enclosed for listing of sources)

At his hearing, claimant testified that he comprehends better today. He can now understand when he reads something. He still does not remember how to do things he knew how to do in the past. He now "has peace from an angel-he asked for this". He knows that the bottom line is love. He feels God is testing him through his appeal. He was on pills and insulin shots for diabetes. He was on medication for elevated cholesterol. He was also on medication for herpes and syphilis. He has some numbness in the last 2 fingers of his left hand. His doctor said this is from diabetes. He is left handed. He has no physical limitations. He has not been able to pass the maintenance test at housing complexes when he applied for a job so he has not been hired. He feels he could do a job if it was doing stuff he knows. If he does not know how to do things, he would have to read how to do them. He feels his only problems working would be slow concentration. He stays to himself, trying to avoid problems. He still has problems understanding, remembering, and concentrating but not as much as he used to. He does not

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finish things he starts, possible due to a lack of concentration. He thinks he could follow 3-4 step instructions. He feels he's "a nice guy". He makes people laugh. He is more spiritual now and can really help people. Under stress/pressure, he gets anxious and sweats-then he quotes scriptures to himself and feels better.

The hearing officer observed that claimant was very pleasant and cooperative. He was very articulate. He smiled often. He went into great detail about his condition in 2002. He said he saw demons and aliens and was visited by them. He insisted that this had been real even if people do not believe him and that he was in another realm at that time. He said he was in a coma at that time. He now trusts God and feels things will work out for him. He had many plans for his invention regarding sanitizing doctors' gloves which he has a patent for and for his music. He is waiting on getting money for the backing of these things. He has a law suit against a nursing home who abused his mother while there before her death.

An analysis of the total evidence establishes that claimant's mental condition has shown medical improvement since the CPD. By his own testimony, while he still has some problems, he is better able to understand, concentrate, and remember today. He feels his only limitation in working would be slow concentration. Information from both of his psychological evaluation(4-06 & 2-07) indicate that his depression has improved, as has his memory and concentration. His daily activities have increased as he now cares for his son, cooks, does housework, and works on his plans for the future. He continues to believe that events from his psychotic episode in 2001 were real. Otherwise, no signs of psychosis are present. He seems rather grandiose regarding his plans for his invention and music. His most recent diagnoses have been bipolar disorder. It is concluded that he has the ability to understand, remember, and carry out simple and low level detail instructions and tasks. He can maintain attention and concentration sufficiently well to complete an 8 hour day. He cannot work around the general public. These findings are consistent with lower levels of semiskilled work not dealing with the general public. Claimant testified that he has no physical limitations. In addition, he has no documented signs of any end organ damage from his diabetes or his high blood pressure. His vision is satisfactory. It is concluded that he does not have a physical impairment(s) that has more than a minimal effect on his daily activities.

Prior to his disability, claimant worked as a maintenance tech and as a building engineer for several years. According to his description of these jobs, they would be classified respectively as maintenance repairer and mechanic, a combination of medium and heavy skilled work and as maintenance superintendent, light skilled work.

Claimant is 48 years old(a younger individual) and has 12+ years of education.

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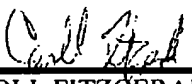
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NUMBER HOLDER'S SSN	411-21-3471
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Are there any other issues relating to this determination? Explain:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

CONCLUSION	
The CLAIMANT is found to be:	
<input type="checkbox"/>	DISABLED
<input type="checkbox"/>	DISABLED, but with a new period of disability the earlier determination that the claimant's disability has ceased is correct. A new period of disability began as of:
<input checked="" type="checkbox"/>	NOT DISABLED
<input type="checkbox"/>	NOT DISABLED, but with a later cessation date. The claimant's disability ceased as of:
Other Conclusions:	
None	

	6-13-08
CARROLL FITZGERALD, Disability Hearing Officer	Date

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Tony D Sherrod

DISABILITY HEARING OFFICER'S DECISION (DIB, CDB, DWB (Including surviving divorced spouse), DI, DS)	NUMBER HOLDER'S SSN 411-21-3471
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Determination of Disability

1. The Social Security regulations require that a person's disability be determined through a series of evaluation steps. The first step for benefits under title II of the Social Security Act (the Act) is to determine whether or not the person is presently engaging in substantial gainful activity (20 CFR 404.1520(b)). This decision was made by the Social Security office before the disability hearing decision was issued. The decision was:

- ☒ You are not engaging in substantial gainful activity
- ☐ You are engaging in substantial gainful activity but may be entitled to an extended period of eligibility as described in 20 CFR 404.1592a.

NOTE: Performance of substantial gainful activity is no longer a basis for finding that a period of disability has ended under title XVI of the Act.

In making the determination of disability, the hearing officer will review the remaining evaluation steps. Depending upon the evaluation of the evidence, the hearing officer may make a determination regarding the claimant's disability at various steps during the review.

2. Does claimant's impairment(s) meet or equal a current listed impairment? ☐ YES ☒ NO

The hearing officer will determine whether the impairment meets or equals an impairment in the Listing of Impairments in the Social Security regulations. The listing contains many medical impairments which would normally prevent a person from doing any gainful activity. If a person's impairment(s) meets or equals an impairment in the listing, he/she will be found disabled. If the impairment does not, the hearing office will continue to the next review step. (20 CFR 404.1594; 20 CFR 416.994(b)). Explain:

Claimant does not meet or equal any current listing of impairments.

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3. Has there been medical improvement of claimant's impairment(s) since the comparison point decision? ☒ YES ☐ NO

The comparison point decision (CPD) is the most recent prior favorable medical decision that the person was disabled or continued to be disabled. Medical improvement is defined as any decrease in the medical severity (as shown by changes in the signs, symptoms, and/or laboratory findings) of the impairment(s) which was present at the CPD (20 CFR 404.1594; 20 CFR 416.994(b)). If medical improvement has occurred, the hearing officer will continue to the next review step (step 4). However, if there has been no medical improvement, the next step will be step 5. Explain:

See "Findings of Fact Analysis".

4. If there has been medical improvement, is it related to the ability to do work? ☒ YES ☐ NO

If a person's impairment(s) met or equalled the listing of impairments in effect at the CPD, the hearing officer will determine (considering only the impairment(s) present at the time of the CPD) whether that same listing, as it then appeared, continues to be met or equalled. If that listing is no longer met or equalled, medical improvement will be determined to be related to the ability to do work. If the CPD was based on medical/vocational considerations, the hearing officer will determine (considering only the impairment(s) present at the time of the CPD) the person's current residual functional capacity (RFC) and determine whether there has been an increase (improvement) in the person's RFC since the time of the CPD. 'Residual functional capacity' refers to those basic work activities a person can do despite his/her impairment(s). If there has been an increase in RFC, medical improvement will be determined to be related to the ability to work. If medical improvement is not related to the ability to do work, the hearing officer will continue to the next review step (step 5). However, if medical improvement is related to the ability to do work, the next review step will be step 6. (20 CFR 404.1594; 20 CFR 416.994(b))
Explain:

At the CPD, claimant was unable to perform any work activity. Currently, he is able to perform limited work activity (see "Findings of Fact Analysis"). Therefore, it is concluded that medical improvement is related to the ability to work.

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NUMBER HOLDER'S SSN | 411-21-3471

5. If there has been no medical improvement or medical improvement has occurred which is not related to the ability to do work, do any of the exceptions to the medical improvement standard apply?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
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These exceptions are classified in 20 CFR 404.1594; 20 CFR 416.994(b). If none of the exceptions applies, the person will be found disabled. If an exception does apply, the hearing officer will continue to the next review step.
Explain:

Does not apply

6. Does claimant have a severe impairment?	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
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If a person's impairment(s) is a slight abnormality or a combination of slight abnormalities which has no more than a minimal effect on a person's ability to do basic work activities, the hearing officer will determine that the person does not have a severe impairment. Examples of work activities include walking, standing, sitting, lifting, carrying, pushing or handling. Also involved are capacities for seeing, hearing, speaking, understanding, and carrying out simple instructions. If medical improvement does not apply and the person does not have a severe impairment(s), he/she will be determined not to be disabled. If medical improvement applies and is shown to be related to the ability to work, the hearing officer will determine whether all current impairments, singly or in combination, are severe. (20 CFR 404.1520-1523, 1594; 20 CFR 416.920-923.994(b); SSR 85-28)
Explain:

See "Findings of Fact Analysis" for claimant's limitations. Since these are workrelated activities, it is concluded that claimant has a severe impairment.

7. What is claimant's RFC based on all current impairments?	lower levels of semiskilled work not dealing with the general public
For the purpose of determining physical exertion requirements of work, jobs are classified as sedentary, light, medium, heavy and very heavy. (20 CFR 404.1545; 20 CFR 416.945, 967) Explain:	

See "Findings of Fact Analysis" for claimant's residual functional capacity(RFC).

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8.	Does claimant's impairment(s) prevent him/her from doing past relevant work?	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
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Past relevant work refers to work that the claimant has done within the last 15 years, has done long enough to learn, and has done for profit or gain. If a person has the residual functional capacity to perform past relevant work, he/she will be considered not disabled. If he/she cannot do past relevant work, the hearing officer will continue to the next review step. (20 CFR 404.1561; 20 CFR 416.961)

Explain:

Claimant's past relevant work as a maintenance tech and as a building engineer are both classified as skilled work. Since claimant has an RFC for lower levels of semi-skilled work, it is concluded that he cannot return to this past work.

9.	Does claimant have a marginal education and work experience that is limited to arduous, unskilled physical labor?	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO
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Generally, if a person has marginal education and work experience of 35 years or more of arduous, unskilled physical labor and the person is not working and cannot perform past work due to a severe impairment, he/she will be considered unable to do lighter work and the person will be considered disabled. If he/she does not meet all of these criteria, the hearing officer will continue to the next review step. (20 CFR 404.1562; 20 CFR 416.962)

Explain:

Claimant has 12+ years of education.

10.	Is claimant of advanced age with a limited education and no work experience or no recent and relevant work experience?	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO
-----	--	--------------------------	-----	-------------------------------------	----

Generally, a person of advanced age with no relevant work experience and a limited education or less will be considered disabled provided his/her impairment is severe. If all of these criteria are not met, the hearing will continue to the next review step. (SSR 8263)

Explain:

Claimant is 48 years old (a younger individual).

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NUMBER HOLDER'S SSN | 411-21-3471

11.	Does claimant's impairment(s) prevent him/her from doing other work?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
a.	If material, are claimant's skills transferable?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
To what occupation(s) can claimant's skills be transferred? Explain:			
Does not apply			
b. What is the vocational rule to be used?		Framework of Vocational Rule 204.00	

12.	What jobs can claimant do if the claimant's vocational factors do not coincide with a vocational rule and if a determination is being made that claimant is not disabled? Explain:
The following jobs are examples of unskilled work not dealing with the general public which are found in any industry and which the claimant can be expected to perform: sack repairer dot 782.687-046 sedentary work, cleaner, housekeeping dot 323.687-014 light work, and laborer, stores dot 922.687-058 medium work.	
If a person cannot do past relevant work, it will be determined whether he/she can do 'other' work (work that exists in significant numbers in the person's region or several regions in the country). To make this decision, the hearing officer considers the person's RFC, occupational base, age, education, and work experience (classified as unskilled, semi-skilled and skilled). If the person's work experience indicates that the work was semi-skilled or skilled, the hearing officer will identify the acquired work skills and, if necessary, specify the occupations to which the acquired work skills are transferable. In deciding this review step, the hearing officer will refer to the medical/vocational guidelines (Appendix 2) of the Social Security regulations. If all the person's vocational factors do not coincide with a particular rule in the guidelines, the hearing officer will use these rules as a frame work for deciding this step. If a person has the capacity to adjust to work other than what he/she has done in the past, the person will be found not disabled. (20 CFR 404.1560-1569; 20 CFR 416.960-969) Explain:	

Claimant is 48 years old (a younger individual) and has 12+ years of education. His RFC is for lower levels of semiskilled work not dealing with the general public. The skills he acquired from his past relevant work as a maintenance tech and building engineer are not transferable to jobs within their RFC. His vocational profile closely approximates Vocational Rule 204.00, Appendix 2 which directs a finding of not disabled. It is established that his vocational outlook is favorable. Therefore, it is found that he is no longer disabled under Social Security regulations.

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TONY D SHERROD
948 N MANASAS ST
MEMPHIS TN 38107-2518

Date:

JUN 17 2008 OFFICE OF PETITIONS

Claim Number: 411-21-3471

We're writing to let you know that we have made a disability hearing decision on your case.

OUR DECISION

We find that your health has improved and you are able to work. This means that your benefits will stop.

The hearing decision is attached to this letter. Our decision deals only with whether you are disabled. You will get another letter about when your payments will stop.

If you agree with our decision, you don't have to do anything.

IF YOU DISAGREE WITH THE DECISION

If you disagree with the decision, you have the right to request a hearing. A person who has not seen your case before will look at it. That person is an Administrative Law Judge (ALJ). The ALJ will review your case again and consider any new facts you have before deciding your case.

- * You have 60 days to ask for a hearing.
- * The 60 days start the day after you receive this letter. We assume you got this letter 5 days after the date on it unless you show that you did not get it within the 5-day period.
- * You must have a good reason for waiting more than 60 days to ask for a hearing.
- * You have to ask for a hearing in writing. We'll ask you to sign a form HA-501-U5, called "Request for Hearing." Contact one of our offices if you want help.

Please read the enclosed pamphlet, "Your Right to an Administrative Law Judge Hearing and Appeals Council Review of Your Social Security Case." It contains more information about the hearing.

APPEAL IN 10 DAYS TO KEEP GETTING YOUR CHECK AND MEDICARE

You have only 10 days to ask us to continue your benefits during your appeal.

- * The 10 days start the day after you get this letter.
- * You can ask us to keep paying you and your family and/or continue your Medicare.

Form SSA-L1675-U2 (08-95)

Social Security Administration
RETIREMENT, SURVIVORS AND DISABILITY INSURANCE

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Date: May 06, 2008 JUL 02 2012

TONY D SHERROD
948 N MANASAS ST
MEMPHIS TN 38107-2518

Claim Number: 411-21-3471

REMINDER NOTICE OF DISABILITY HEARING

This is a reminder of a hearing before a Disability Hearing Officer which has been scheduled for you.

Date: May 13, 2008 Time: 01:00 PM

Place: SOCIAL SECURITY ADMINISTRATION
1330 Monroe Avenue
Memphis TN 38104

Please be prompt because the hearing will begin on time.

Your case file will be available for you and/or your representative to look at 30 minutes prior to the hearing, at the place where the hearing is being held. To make arrangements to review your case file before your hearing date, or if you have any questions, call the Disability Hearing Unit or any Social Security office.

Things you may bring with you to the hearing:

1. Witnesses that have knowledge of your impairment.
2. Additional medical information that may not be in your file.
3. A list of current prescriptions.

If you do not plan to come to the hearing, it is important that you call the Disability Hearing Unit or any Social Security office as soon as possible. This hearing will not be rescheduled without good cause. The telephone number of the Disability Hearing Unit is (615) 743-7377 or toll free 1-800-342-1117 extension 7377.

Carroll Fitzgerald, Hearing Officer

TELL SOMEONE WHEN YOU ARRIVE. BRING 2007 MEDICAL RECORDS.
03 - 08

C:

FORM SSA-L951 U2 (5-86)

SOCIAL SECURITY ADMINISTRATION

659 UNIT: 17

BJM

9502525928

SUMMARY OF EVIDENCE

CODE NUMBERS

DDS

440

DMU

7843

TIME IT TAKES TO COMPLETE THIS FORM: We estimate that it will take you about 15 minutes to complete this form. This includes the time it will take to read the instructions, gather the necessary facts and fill out the form. If you have comments or suggestions on how long it takes to complete this form or on any other aspect of this form, write to the Social Security Administration, ATTN: Reports Clearance Officer, 1-A-21 Operations Bldg., Baltimore, MD 21235, and to the Office of Management and Budget, Paperwork Reduction Project (0960-0430), Washington, D.C. 20503.

PRIVACY/PAPERWORK ACT NOTICE: The Social Security Administration (SSA) is authorized to collect the information on this form under sections 205(a), 1631 (e)(1)(A) and (B), and 1872 of the Social Security Act (the Act), as amended (42 U.S.C. 405, 1383, and 1395ii). Giving us this information is mandatory. SSA will use the information on this form to provide reconsideration review components a means for listing medical/vocational reports included in claims folders being forwarded to Disability Hearing Units for evidentiary hearings required by section 205(b) of the Act and 20 CFR sections 404.913(b), 404.914(a), 416.1413(b), and 416.1414(a).

CLAIMANT'S NAME

TONY D SHERROD

NUMBER HOLDER'S SOCIAL SECURITY NUMBER

411-21-3471

List in chronological order (newest to oldest based on date of report) all medical and vocational reports of information pertaining to the issue of disability which were considered in the development of the case. Include physicians' reports (specify if consultative examinations (CEs)), hospital records, medical or vocational test results.

A. MEDICAL/VOCATIONAL REPORTS SINCE COMPARISON POINT DECISION

MEMPHIS MENTAL HEALTH 02/21/01 02/26/01
FRAYSER FAMILY COUNSELING 04/30/02 06/24/02

B. MEDICAL/VOCATIONAL REPORTS AT COMPARISON POINT DECISION

BISSON HEALTHLOOP CLINIC 12/26/02 03/31/06
HEALTHLOOP GUTHRIE 12/26/02 10/09/06
DR. D. MURPHY, PH.D, CONSULTATIVE EXAM 02/15/07
DR. M. BATTLES, MD, CONSULTATIVE EXAM 02/14/07

Wholistic Healthcare Services, Consultative Exam 4/8/07